



Case No.: LAGN-1002C
Patent Application
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Torben Helshoj)	
)	Group No.:
Serial No.:	10/722,861)	Unknown
)	
Filed:	November 26, 2003)	Examiner:
)	Unknown
For:	BAND SAW BLADE STABILIZER)	
)	

PRELIMINARY AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir/Madam:

Prior to the initial examination of the above-identified continuation patent application, please amend the application as follows:



Please type a plus sign (+) inside this box → ☐

PTO/SB/21 (08-00)
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Applicati n Number	10/722,861
	Filing Date	November 26, 2003
	First Named Inventor	Torben Helshoj
	Group Art Unit	unknown
	Examiner Name	unknown
Total Number of Pages in This Submission		Attorney Docket Number LAGUN-002C

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Certificate of Mailing Return Receipt Postcard
Remarks		

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JAN 29 2004

ATTORNEY DOCKET NO: LAGUN-002C
TITLE: BAND SAW BLADE STABILIZER

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